

# Eagle Point Irrigation District

P.O. Box 157  
Eagle Point, OR 97524

2429 Brophy Rd.  
Fax 541-826-8738

epidist@centurylink.net  
Phone 541-826-3411



## PUBLIC RECORDS REQUEST FORM

**Instructions:** Please fill out the top portion and send the form to us. We will send it back with an estimate of the cost. Once the payment is received, we will process your request. If cost goes over the estimate, we will contact you before proceeding. Credit Card forms can be found on our website: [www.eaglepointirrigation.com](http://www.eaglepointirrigation.com)

Name \_\_\_\_\_ Address \_\_\_\_\_  
Date \_\_\_\_\_ City, State, zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email address \_\_\_\_\_

Records requested: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
signature

\_\_\_\_\_  
date

Do not write below this line - District use only

### COST:

_____ Research	\$35.00	per hour ( ¼ hr minimum)	\$ _____
_____ Computer reports	\$15.00	each + copies	\$ _____
_____ Copies	\$0.25	each	\$ _____
_____ Postage / mailing	actual cost		\$ _____
_____ Credit Card use fee	3% of amount		\$ _____
_____ Other	_____		\$ _____
_____ Manager Consultation	\$125.00	first hour and	\$ _____
	\$75.00	per hour thereafter	

Total due \$ \_\_\_\_\_

Please send payment to:

Your request will be processed after payment is received

Eagle Point Irrigation District  
PO Box 157  
Eagle Point, OR 97524

\_\_\_\_\_  
District Signature

\_\_\_\_\_  
Date